



PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

100

Application Number	09/812,703
Filing Date	March 19, 2001
First Named Inventor	Terrance Moore et al.
Art Unit	3626
Examiner Name	Frenel, Vanel
Attorney Docket Number	044258.0002

ENCLOSURES (Check all that apply)

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | 1. Fee Transmittal, check \$180; |
| <input checked="" type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | 2. Supplemental Information Disclosure Statement After Final Office Action and Notice of Appeal; and |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Landscape Table on CD | 3. Postcard. |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application | Remarks | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Bracewell & Smith LLP		
Signature			
Printed name	Jeffrey S. Whittle		
Date	8-30-06	Reg. No.	36,382

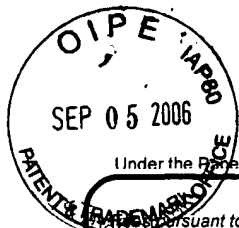
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Dora Rios	Date	8-30-2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
180**Complete if Known**

Application Number	09/812,703
Filing Date	March 19, 2001
First Named Inventor	Terrance Moore et al.
Examiner Name	Frenel, Vanel
Art Unit	3626
Attorney Docket No.	044258.0002

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 500259 Deposit Account Name: Bracewell & Giuliani LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☐ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
		0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge) Supplemental IDS After Final Office Action and Notice of Appeal

0
180**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 36,382	Telephone 713-221-1185
Name (Print/Type)	Jeffrey S. Whittle		Date 8-30-06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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AF/12/2006

CERTIFICATE OF MAILING 37 C.F.R. 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date indicated below.

August 30, 2006

Dora Rios

Date

Dora Rios

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Terrance Moore, *et al.*

Serial No.: 09/812,703

Filed: March 19, 2001

For: ***Methods For Collecting Fees For
Healthcare Management Group***

Confirmation No. 9723

Examiner: Frenel, Vanel

Group Art Unit: 3626

Attorney Docket No. 044258.000002

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
AFTER FINAL OFFICE ACTION, AND NOTICE OF APPEAL**

Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Attached is Form PTO-1449 listing several references for consideration in the examination of the above-identified application. A copy of each non-patent reference is also enclosed.

It is requested that these references be considered by the Examiner and officially made of record in accordance with the provisions of 37 C.F.R. § 1.97 and Section 609 of the M.P.E.P. Each item of information contained in the information disclosure statement was first cited in a communication in a related application not more than three months prior to the filing of this supplemental information disclosure statement. No item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing the certification

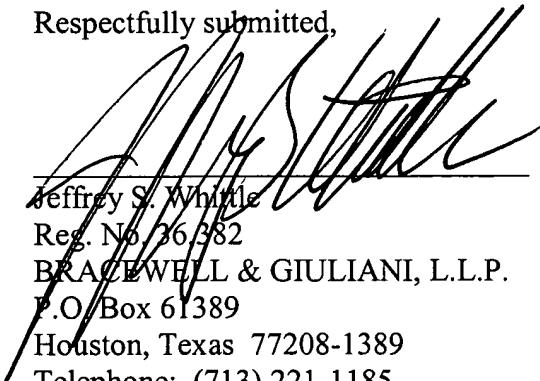
after making reasonable inquiry, no item of information contained in the information disclosure statement was known to any of the individuals designated in 37 CFR § 1.56(c) more than three months prior to the filing of this information disclosure statement.

Applicants submit herewith the required fee of \$180. The Commissioner is hereby authorized to charge any additional fees or credit any overpayments to the deposit account of Bracewell & Giuliani LLP, Deposit Account No. 50-0259, Attorney Docket No. 044258.000002.

Respectfully submitted,

Date: _____

8-30-06



Jeffrey S. Whittle
Reg. No. 36,382
BRACEWELL & GIULIANI, L.L.P.
P.O. Box 61389
Houston, Texas 77208-1389
Telephone: (713) 221-1185
Facsimile: (713) 221-2141



Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>		Complete if Known			
		Application Number	09/812,703		
		Filing Date	March 19, 2001		
		First Named Inventor	Terrance Moore et al.		
		Art Unit	3626		
		Examiner Name	Vanel Franel		
Sheet	1 Of 1	Attorney Docket Number	044258.000002		
U.S. PATENT DOCUMENTS					
Exr Initials*	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines Where Relevant Passages Or Relevant Figures Appear
	Number- Kind Code (if known)				
FOREIGN PATENT DOCUMENTS					
Exr Initials	Foreign Patent Document			Date of Publication of Cited Document MM-YYYY	T
	Country Code	Number	Kind Code (if known)		
		N/A			
OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS					
Exr Initials	Include Name of first Author (in CAPITAL LETTERS), title of the article (where appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), volume-issue number(s), page(s), date (in parentheses). If a book, also include publisher and city and/or county where published.				T
	Cherney, Choosing an Advantageous Risk-Sharing Arrangement, March 1999, Healthcare Financial Management, pp. 35-37.				Y
	Rosenstein et al., Changing Physician Behavior is Tool to Reduce Health Care Costs, September 1991, Healthcare Strategic Management, Vol. 9, Iss. 9, pp. 14-16.				Y
	Snail, The Effects of Hospital Contracting for Physician Services on Hospital Performance, Spring 2000, University of California, Berkley, pp. 1-182.				Y
Examiner Signature				Date Considered	